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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *PS*

This appln claims benefit of 60/461,575 04/10/2003

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *Name*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 06/18/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CANADA	SHEETS DRAWING 0	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>PS</i> initials				

## ADDRESS

AIR MAIL

23529

## TITLE

CBD-delta8-THC composition

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